								Application or Docket Number					
	PATENT	RD											
Effective October 1, 2003								10 758,144					
CLAIMS AS FILED - PART I								MALLE	NTITY		OTHER	THAN	
(Column 1) (Column TOTAL CLARACE						umn 2)		YPE [OR	•		
TOTAL CLAIMS 22								RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		. [BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20=		* 2			X\$ 9=		OR	X\$18=	36	
INDEPENDENT CLAIMS			5 minus 3 =		7			X43=		OR	X86=	177	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	TOTAL	<u> </u>	OR	TOTAL	978	
CLAIMS AS AMENDED - PART II									L	1	OTHER		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A	¥ .	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1 1			
1,10,13,18,20								+145=		OR	+290=		
	·						AD	TOTAL DIT. FEE		OR,	TOTAL ADDIT. FEE		
		(Column 1)	T	(Colum		(Column 3)	,						
NDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMEN	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM	·	-			lt			
								+145=		OR	+290=	•	
								TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									. •				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=	>	(\$ 9=		OR	X\$18=		
A ME	Ind pendent		Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR			
* If	the entry in colur	L	145=		OR	+290=							
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
Ť	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number (found	in the appr	opriat box	in colu	mn 1.		